PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known				
			Application Number				
FEE TRANSMITTAL For FY 2005			Filing Date	N/A(U	N/A(U)// >)(O)(4)(金/ U		
			First Named Inven		Braiman, Michael		
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name	N/A	N/A		
		Art Unit	N/A	1 '			
TOTAL AMOUNT OF PAYMENT (\$) 1,250.00		Attorney Docket N	o. 10064	10064-0011			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: 50/555 Deposit Account Name: Klehr Harr; 50n							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 Credit any overpayments							
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type	<u>Sr</u> Fee (\$)	nall Entity Fee (\$)	Small Entity S) Fee (\$)		<u>ll Entity</u> ee (\$)	Fees Paid (\$)	
Utility	300	150 500			00	\$500.00	
Design	200	100 100	50	130	65		
Plant	200	100 300	150	160 .	80		
Reissue	300	150 500	250		00		
Provisional	200	100 0	0	0	0		
2. EXCESS CLAIM FEES Fee Description Small Entity Fee (\$) Fee (\$)							
Fee Description Each claim over 20 (including Reissues)						Fee (\$) 25	
Each independent claim over 3 (including Reissues)						100	
Multiple dependent claims					200 360	180	
Total Claims				<u>!</u>	Multiple Depe	endent Claims	
20 or HP =		_ ×= _	· · · · · · · · · · · · · · · · · · ·		Fee (\$)	Fee Paid (\$)	
HP = highest number of total cla	ims paid for, k tra Claim		ee Paid (\$)	_			
- 3 or HP =		_x= _					
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 shorts or fraction thereof. See 35 H.S.C. 41(a)(1)(C) and 37 CFR 1.16(a)							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): Petition Under 37 C.F.R. 1.137(b) \$750.00							
SUBMITTED BY							
Designation Me							
Signature Signature					Date (4, 2006	
vame (Fillo Type)					Louis 1/6	zn 7, -006	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public winch is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IAP20 Roc'd PEULARD 09 JAN 2006

Certificate of Mailing under 37 CFR 1.10

I hereby certify that this PETITION FOR REVIVAL OF AN INTERNATIONAL APPLICATION FOR PATENT DESIGNATING THE U.S. ABANDONED UNINTENTIONALLY UNDER 37 C.F.R. 1.137(b) is being deposited with the United States Postal Service in an envelope as "Express Mail Post Office to Addressee", No. <u>EQ019230694US</u> addressed to:

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on <u>Journ 4,2006</u>
Date ()

Sixta L H Signature

Anita L. Hahn

Typed or printed name of person of signing Certificate